

STATE OF SOUTH DAKOTA


Statement of Legal Newspaper Ownership and Circulation

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Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER The Miller Press		2. DATE 9-30-19
3. FREQUENCY OF ISSUE Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY 52	3B. ANNUAL SUBSCRIPTION PRICE \$ 50/60
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 114 West Third Street Miller, SD 5762		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) 114 West Third Street Miller, SD 5762		
6. FULL NAME OF PUBLISHER: Janet L. Kittelson and Michael G. Caviness		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME Janet L. Kittelson and Michael G. Caviness	COMPLETE MAILING ADDRESS 19700 363RD Ave. St. Lawrence, SD 57362	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. none		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1400	1400
B. PAID AND/OR REQUESTED CIRCULATION	190	260
1. Sales through dealers and carriers, street vendors, and counter sales.		
2. Mail Subscription (Paid and or requested)	1007	890
3. Paid Electronic Copies	57	57
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1254	12071
D. FREE DISTRIBUTION	10	10
1. BY MAIL, CARRIER OR OTHER MEANS		
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1264	1217
F. COPIES NOT DISTRIBUTED	203	183
1. Office use, left over, unaccounted, spoiled after printing		
2. Return from News Agents	135	65
G. TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	1400	1400

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

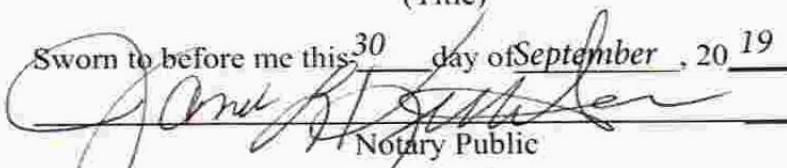

 (Signature)

Michael G Caviness

(Title)

State of South Dakota)
 County of Hand)
 (Seal)

Sworn to before me this 30 day of September, 2019


 Notary Public
 My commission expires: 7-25-25